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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 C.F.R. § 1.63)			Attorney Docket	No.			
[X] Declaration Submitted with Initial Filing OR							
Declaration Submitted after Initial Filing (surcharge (37 C.F.R. § 1.16(e)) required			ng				
			First Named Inve	entor			
			COMPLETE IF KN	COMPLETE IF KNOWN			
			Application Num	ber			
			Filing Date				
			Group Art Unit				
			Examiner Name				
As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: (Title of the Invention)							
Tool For Injection Molding of Toothbrushes							
the specification of which [X] is attached hereto OR [] was filed on (MM/DD/YYYY), as United States Application Number or PCT International Application							
Number, and was amended on (MM/DD/YYYY), (If applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56.							
application(s) for pal which designated at have also identified to	tent or invent least one cou below, by che	or's certificate untry other the cking the box	5 U.S.C. 119(a)-(d) o e, or 365(a) of any PC an the United States c, any foreign applicat ion having a filing dat	T international of America, listion for patent	al application ited below an or inventor's	d	
on which priority is o	claimed.				Certified (
Prior Foreign Country Application		Foreign Filing Date (MM/DD/YYYY)	Priority Not	Attache	ed		
Number(s)				Claimed 1	YES [}	No []	
200 07 304.4	Germany		04/20/2000			֓֞֝֞֝֞֞֞֝֞֝֞֞֞֞֞֞֞֓֞֞֞֞֞֞֓֓֞֞֞֞֓֞֞֞֓֓֞֞֞֞֞֓֓֞֝֞֓֓֞֝֞֓֓֞֝֓֡֝֝֓֓֡֝֝֡֓֝֡֝֝֡֡֝֝֡	
[] Additional foreign application numbers are listed on a supplemental priority data sheet							
PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s)							
Application Number(s) Filing Date (e (MM/DD/YYYY)	[] Additional provisional application Numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				

attached hereto

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Burden Hour Statement, This form is estimated to take 3.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this to should be sent to the Chief information Officer, Patient and Trademark Office. Washington, OC 20231. OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissions for Patients,

DECLARATION - Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. **Parent Patent** U.S. Parent Application or PCT Parent **Parent Filing Date** Number (MM/DD/YYYY) Number (if applicable) [] Additional U.S. or PCT international application numbers are listed on a supplemental priority date sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: [X] Customer Number 22204 OR [X] Registered practitioner(s) name/registration number listed below. Registration Number Registration Number Name Name 36,092 Tim L. Brackett, Jr. 20,932 Daniel W. Sixbey 38,285 Eric J. Robinson 24,312 Stuart J. Friedman 31,196 Robert M. Schulman 26,477 Charles M. Leedom, Jr. 43,143 Daniel S. Song 27,997 David S. Safran Marc S. Kaufman 35,212 28,290 Thomas W. Cole 34,339 Corinne R. Gorski 32,815 Donald R. Studebaker 43,077 Kenneth G. Salen 35,483 Jeffrey L. Costellia 39,715 James E. Howard 41,467 Brian C. Oakes 45,285 Jason H. Vick 38,434 Luan C. Do 41,345 Carolyn Baumgardner Paul D. Golian 42,591 Direct all correspondence to: [X] Customer Number 22204 Stuart J. Friedman, Esq. Name: NIXON PEABODY LLP Firm: 8180 Greensboro Drive, Suite # 800 Address: McLean, Virginia 22102 City/State/Zip Code:: FAX: (703) 883-Telephone: (703) 790-9110 Country: United States 0370 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful faise statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor. Name of Sole or First Inventor: Family Name or Surname Given Name (first and middle [if any]) -Boucherie Bart Gerard 07/04/01. Date: Inventor's Signature: Citizenship: Country: State: Residence: City Belgian Belgium Belgium 8870 Izegem Post Office Address Ambachtenstraat 84. Belaium 8870. Izegem Country: ZIP: State: City: Supplemental Additional Inventor(s) sheet(s) PTO/SB/02A [] Additional inventors are being named on the